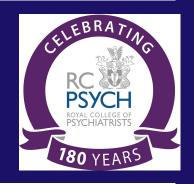
QUALITY NETWORK FOR CRISIS RESOLUTION AND HOME TREATMENT TEAMS NEWSLETTER



Edited by: Tia Thompson-Sangster, Project Officer

WELCOME



Welcome to the Quality Network for Crisis Resolution and Home Treatment Teams (QNCRHTT) Spring 2021 newsletter! As a network we hope to continue to support our member teams across the UK to improve the quality of care given to patients and their family/carers.

This edition of our newsletter features an article submission from Islington Crisis Resolution Team discussing the way they overcome a common challenge amongst crisis resolution and home treatment teams across the UK; staff

continuity. Patients and carers have often fed-back to the network their frustration with the lack of continuity of care and the various issues that can arise surrounding it such as needing to regularly repeat the same information to different staff. We as a network are looking to identify ways different teams across the UK tackle this issue. Ideas include key worker models and quality and effective handovers between staff members.

The newsletter also includes information about upcoming QNCRHTT events, standards development and an opportunity to meet one of the faces behind network, Cassie!

The QNCRHTT team would like to thank you all for your ongoing participation and support. We wish you the best for the upcoming year!

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Continuity of Patient Care in Crisis Resolution Home Treatment Teams

"The worst thing is all the different faces you meet. I wish they could adjust their rotas to minimise this, as seeing fewer people would be easier" (Care Quality Commission, 2015).

The quote above illustrates one major challenge associated with crisis resolution teams. The shift-based nature of crisis teams means delivering continuity of care is an inherent problem, it is difficult for the same staff members to be available during a patient's episode of care.

This can lead to a frustrating experience of crisis team care. For example, research has routinely demonstrated that service users find it difficult to form strong, therapeutic relationships because multiple staff members are involved in their care (Carpenter, Falkenburg, White & Tracy, 2013; Johnson, 2013).

Morant et al.'s (2017) focus groups also indicated that service users find it particularly exasperating when they receive conflicting advice and have to repeat their history to each clinician. Therefore, crisis teams have been advised to limit the number of staff members visiting a service user and improve information sharing between team members (Wheeler et al., 2015; Morant et al., 2017).

Author:

Gamze Evlat, Assistant Practitioner, Islington Crisis Resolution Team

Islington Crisis Resolution Team use several techniques to achieve this including twice daily handovers and twice weekly multidisciplinary meetings. These meetings give staff members the opportunity to discuss the service user's episode of care, raise any concerns and handover the outcome of their last visit.

The morning handovers are also documented on our electronic patient information system daily. These entries include each patient's diagnosis, current risk, and the plan moving forward. This allows staff members to track each service user's progress, and identify what referrals and signposting have been made, thus reducing the likelihood of service users' receiving inconsistent advice.

The importance of continuity of care, and its impact on establishing therapeutic relationships is also recognised by our clinicians. The shift lead will ask staff members whether they have already met any patient's while allocating visits, and it is a common occurrence for staff members to volunteer to visit someone they have an established relationship with. If this cannot be facilitated, we ensure clinicians have adequate time to read a patient's notes and prepare for their visit. It is also important to take the service

users' preference into account, and we make note of those who have requested to see familiar faces.

I recently received positive feedback from a patient who was initially concerned about meeting different clinicians and repeating herself but found everyone to be "well-informed and attentive". The results of the Friends and Family test in February 2021 also revealed that 75% of patients rated their experience as "very good" and the rest "good". One patient

commented "professional staff always knowledgeable, provides relevant information".

This demonstrates that while continuity of care is an inherent challenge, our practice can be adapted to enhance patient experience of crisis care. This is crucial to develop therapeutic relationships, provide emotional support, and meet the service users' goals.

References

Care Quality Commission. (2015). Right here, right now. CQC, London.

Carpenter, R. A., Falkenburg, J., White, T. P., & Tracy, D. K. (2013). Crisis teams: systematic review of their effectiveness in practice. The Psychiatrist, 37(7), 232-237.

Morant, N., Lloyd-Evans, B., Lamb, D., Fullarton, K., Brown, E., Paterson, B., ... & Johnson, S. (2017). Crisis resolution and home treatment: stakeholders' views on critical ingredients and implementation in England. BMC psychiatry, 17(1), 1-13.

Wheeler, C., Lloyd-Evans, B., Churchard, A., Fitzgerald, C., Fullarton, K., Mosse, L., ... & Johnson, S. (2015). Implementation of the Crisis Resolution Team model in adult mental health settings: a systematic review. BMC psychiatry, 15(1), 1-14.

HTAS CHAT is moving to Knowledgehub!

The HTAS chat will officially be moving to Knowledgehub on ****

On Knowledgehub you can find a range of information and connect with other home treatment and crisis resolution teams.

You will have access to the:

Forum - Here is the discussion group. You can post questions (threads) and respond to others.

Library - Here you can find resources and documents relevant to QNCRHTT members.

Events - Here we will post our upcoming events and activities.

To request to join the group, simply click here.

Special Interest Day 2021: COVID and **CRHTTs**

On Thursday 06 May, the Quality Network for Crisis Resolution Home Treatment Teams held our 2021 Special Interest Day. The theme of the day was around crisis resolution and home treatment teams response to the COVID- to see you at our 19 pandemic.

engaging discussions presentations, and reflections on the impact of the past year for patients, family/carers and healthcare workers.

Thank you to all those who attended, we hope upcoming events in 2021!

The day was filled with

Some Key Research

Moral Injury, Mental Health and Healthcare Staff Presentation - Neil Greenberg

Mental health of staff working in intensive care durina Covid-19

N. Greenberg, D. Weston, C.Hall, T. Caulfied, V.Williamson and K.Fong

What healthcare leaders need to do to protect the psychological well-being of frontline staff in the COVID-19 pandemic N. Greenberg, D. Tracy

How might the NHS protect the mental health of health-care workers after the COVID-19 crisis? N.Greenberg, S. Brooks, S. Wessely and D. Tracy

Special thank you to our host and speakers:

Georgina Mills, Clinical Team Lead, West Essex CRHTT, Essex Partnership University NHS Foundation Trust and members of the ONCRHTT Advisory Group

Sonia Johnson, Professor of Social and Community Psychiatry, UCL and Consultant Psychiatrist, Camden and Islington NHS Foundation Trust

Neil Greenberg, Professor of Defence Mental Health and Consultant Occupational and Forensic Psychiatrist, Kings College London

Arden Tomison, Founder & CEO and Lia Ali, Consultant Psychiatrist, NHS Clinical Advisor, Chief Safety Officer, Thalamos

Teresa Bennett and Colin Bennett, Community Mental Health Nurses, West Cornwall Home Treatment Team, Cornwall Partnership NHS Foundation Trust

Ingrid Baldwin, Carer Representative, QNCRHTT, RCPsych

60 SECONDS WITH: CASSIE BAUGH

Job Title:

Programme Manager

When you joined the College: 17 May 2017

Tell us a little bit about your role:

I work across four quality networks; PLAN, HTAS (QNCRHTT), ECTAS and MSNAP. My role is to oversee everything that happens on the networks, support in the development and link in with member services and our Advisory Groups and Accreditation Committee's. I really enjoy the role and have learnt a lot through my career at RCPsych.

What were you doing before you joined the College?

I worked as a Prison Offender Resettlement Worker. This meant I would see everyone who came into prison and work with them in their last 12 weeks to identify any needs they had and link in with their probation officer.

If you could learn anything new, what would it be?

Ooh, to learn Spanish fluently, the play the piano fully and apparition (for Harry Potter fans).

What superpower would you like to have and why?

Apparition, so I could go wherever I wanted whenever. It would also



mean I could travel the world very easily!

What was the title of the last book you read?

I am currently reading The Thursday Murder Club, before that I read Life of Pi.

What is your favourite comfort food and when was the last time you had it?

Macaroni cheese. I have also made other people enjoy it as their comfort food, it's my signature dish! I absolutely love it and is perfect for any occasion, whether you are celebrating of having a cosy day. To be honest, it's been a little while since I had it I need to make some!

What three things would you take with you if you were stranded on a desert island?

A very large book, survival equipment (although I would be absolutely useless, I am not for the outdoors) and tea.

Tell us an interesting fact about yourself that few people would know about:

I have climbed Kilimanjaro. I hated it.

What is the one thing you wish people knew more about?

Obviously mental health and how it affects everyone. No one is immune to become mentally ill, and the more people know about it, the less stigmatising it will be.

What is your favourite quote/saying?

Have courage and be kind – Cinderella film Follow us on twitter to keep updated with the latest news and events from the network and the College:

@rcpsychCCQI

UPCOMING EVENTS

QNCRHTT PEER-REVIEWER TRAINING

<u>Date</u>: Tuesday 13 July 2021 <u>Time</u>: 1:30pm - 4:00pm <u>Location</u>: Online via Zoom

Booking: Please complete this short online booking form. Once

approved you will receive a confirmation email from Zoom.

QNCRHTT ANNUAL FORUM - SAVE THE DATE!

QNCRHTT are hosting our 2021 annual forum later this year.

Make sure to save the date and join us for our next annual forum.

Date: September 07 2021 Location: Online via Zoom

Booking: Free tickets for all members. Non-members tickets cost

£55 per person.

QNCRHTT STANDARDS DEVELOPMENT

We are inviting our members to be involved in the development of QNCRHTT standards.

QNCRHTT is looking to develop standards to cover services who provide a 24/7/crisis line response, a service to children and young people and older people. The QNCRHTT standards should reflect the service crisis resolution and home treatment teams provide.

The first session focused on the 24/7 and crisis line response.

The second session will focus on standards for children and young people.

The third session will focus on standards for older people.

These standards will then form part of the next publication of the network's standards.







Home Treatment Accreditation Scheme (HTAS)

Standards for Home Treatment and Crisis Resolution Teams -Fourth Edition

Editors: Cassie Baugh, Eve Blanchard, India Hopkins and Pranveer Singh

Publication number: CCOI 321

Date: November 2019

Standards Development Session Dates

Online via Microsoft Teams

TUESDAY 25 MAY, 2.30-4.30 PM TUESDAY 22 JUNE, 2.30-4.30 PM TUESDAY 20 JULY, 2.30 – 4.30 PM

If you would like to be involved, please email an expression of interest to QNCRHTT@rcpsych.ac.uk

We would like the group to reflect a multi-disciplinary team.

Would you like to feature in one of our upcoming newsletters?

Articles may be about:

- Area of good practice
- An achievement/award
- A quality improvement project
 - An area of research
- Response and learning during COVID-19.

We are also looking to include a segment on testimonials from QNCRHTT member services, describing their experience of working with QNCRHTT and the impact accreditation can have on the team.

If you would like to contribute to the newsletter please email us at:

QNCRHTT@rcpsych.ac.uk.

USEFUL LINKS

CARS

www.cars.rcpsych.ac.uk

College Events

www.rcpsvch.ac.uk/events

Department of Health

www.doh.gov.uk

Institute of Psychiatry

www.iop.kcl.ac.uk

National Institute for Health and Clinical Excellence

www.nice.org.uk

Centre for Mental Health

https://www.centreformentalhealth .org.uk/

Contact the team

We love hearing from our members and helping to facilitate communication amongst our teams — after all, it's what being part of a network is all about!

QNCRHTT shared mailbox: QNCRHTT@rcpsych.ac.uk

College Address: 21 Prescot Street Whitechapel London E1 8BB

Find all updates related to the network on the <u>College website</u>.